2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2009
Secretary of State

DOCUMENT# N93000002623

Entity Name: FIRST CHRISTIAN CHURCH (DISCIPLES OF CHRIST) OF HOMESTEAD, INC.

Current Principal Place of Business:

1001 NORTHEAST KINGS HIGHWAY
HOMESTEAD, FL 33030

New Principal Place of Business:

Current Mailing Address:

1001 NORTHEAST KINGS HIGHWAY
HOMESTEAD, FL 33030

New Mailing Address:

FEI Number: 59-1031401 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

AKERMAN, BARBARA J
1001 NORTHEAST KINGS HIGHWAY
HOMESTEAD, FL 33030 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: S ( ) Delete
Name: AKERMAN, JEAN
Address: 14925 SOUTHWEST 297TH TERRACE
City-St-Zip: LEISURE CITY, FL 33033

Title: P ( ) Delete
Name: MALLEY, JEFF
Address: 1521 FLAMINGO COURT
City-St-Zip: HOMESTEAD, FL 33035

Title: S ( ) Delete
Name: MALLEY, THERESA
Address: 1521 FLAMINGO COURT
City-St-Zip: HOMESTEAD, FL 33035

Title: VP ( ) Delete
Name: STANLEY, GEORGE
Address: 344 NW 2ND STREET
City-St-Zip: FLORIDA CITY, FL 33034

Title: T ( ) Delete
Name: STANLEY, KIM
Address: 344 NW 2ND STREET
City-St-Zip: FLORIDA CITY, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change ( ) Addition
Name: AKERMAN, BARBARA J
Address: 14925 SOUTHWEST 297TH TERRACE
City-St-Zip: LEISURE CITY, FL 33033

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEFF MALLEY P 04/12/2009

Electronic Signature of Signing Officer or Director — Date